

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S02188

FILED
Apr 11, 2006
Secretary of State

Entity Name: THE MORTGAGE CENTER OF VOLUSIA COUNTY, INC.

Current Principal Place of Business:

140 S. ATLANTIC AVE.
ORMOND BEACH, FL 32176

New Principal Place of Business:

Current Mailing Address:

140 S. ATLANTIC AVE.
ORMOND BEACH, FL 32176

New Mailing Address:

FEI Number: 59-3029025

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TACINELLI, MICHAEL
140 S. ATLANTIC AVE.
ORMOND BEACH, FL 32176 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TACINELLI, MICHAEL
Address: 28 DOMICILIO AVE
City-St-Zip: ORMOND BCH, FL 32174

Title: VP () Delete
Name: TACINELLI, DIANE
Address: 28 DOMICILIO AVE
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL TACINELLI

P

04/11/2006

Electronic Signature of Signing Officer or Director

Date